

NAIC LOSS COST DATA ENTRY DOCUMENT

1. This filing transmittal is part of Company Tracking # _____

2. If filing is an adoption of an advisory organization loss cost filing, give name of Advisory Organization and Reference/ Item Filing Number _____

		Company Name			Company NAIC Number
3.	A.	Consumers Insurance USA, Inc.	B.		10204

		Product Coding Matrix Line of Business (i.e., Type of Insurance)			Product Coding Matrix Line of Insurance (i.e., Sub-type of Insurance)
4.	A.	Property and Casualty	B.		Personal Auto

5.

(A) COVERAGE (See Instructions)	(B) Indicated % Rate Level Change	(C) Requested % Rate Level Change	FOR LOSS COSTS ONLY				
			(D) Expected Loss Ratio	(E) Loss Cost Modification Factor	(F) Selected Loss Cost Multiplier	(G) Expense Constant (If Applicable)	(H) Co. Current Loss Cost Multiplier
BI	-43.8%	-43.8%	NA	NA	NA	NA	NA
PD	+2.9%	+2.9%					
COMP	-25.4%	-25.4%					
COLL	-27.3%	-27.3%					
TOTAL OVERALL EFFECT	-20.14%	-20.14%					

6. 5 Year History Rate Change History

Year	Policy Count	% of Change	Effective Date	State Earned Premium (000)	Incurred Losses (000)	State Loss Ratio	Countrywide Loss Ratio
2006	Initial Filing	0	04/2006	0	0	0	0

7.

Expense Constants	Selected Provisions
A. Total Production Expense	NA
B. General Expense	NA
C. Taxes, License & Fees	NA
D. Underwriting Profit & Contingencies	NA
E. Other (explain)	NA
F. TOTAL	NA

8. N Apply Lost Cost Factors to Future filings? (Y or N)

9. 4.35% Estimated Maximum Rate Increase for any Insured (%). Territory (if applicable): White County

10. 34.7% Estimated Maximum Rate Decrease for any Insured (%) Territory (if applicable): Washington County